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| Substitute for form 1449A/PTO | | | |
| INFORMATION DISCLOSURE STATEMENT BY APPLICANT | | | |
| (Use as many sheets as necessary) | | | |
| Sheet | 1 | of | 1 |
| <i>Complete if Known</i> 10/539137 | | | |
| Application Number Filing Date First Named Inventor Art Unit Examiner Name Attorney Docket Number | | | |
| 02814.0081-00000 | | | |

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| Examiner Signature | <i>Carsten Lm</i> | Date Considered | 12-12-07 |
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